

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MINNESOTA

In re:

BKY 04-34826

Troy Sederberg,

Debtor(s).

**NOTICE OF MOTION,
OBJECTION TO CLAIM(S)**

PLEASE TAKE NOTICE that the Court will hold a hearing on this objection November 1, 2004, at 3:00 p.m. in Courtroom 228B, 228 Federal Bldg., 316 North Robert Street, St. Paul, Minnesota, or as soon thereafter as counsel can be heard. Responses to this objection shall be filed and delivered no later than October 21, 2004, at 3:00 p.m., which is (7) seven days before the hearing, or mailed no later than October 18, 2004, which is (10) ten days before the hearing. IF NO RESPONSE TO THIS MOTION IS TIMELY FILED THE COURT MAY GRANT THE MOTION WITHOUT A HEARING.

John A. Hedback, on behalf of Troy Sederberg (Debtor), hereby objects to the claim(s) described below, and supports the objection(s) as follows:

1. Troy Sederberg is the debtor in the above-referenced bankruptcy case. This case is pending before this Court.

2. This Court has jurisdiction over this matter under 28 U.S.C. Section 157 and 1334. This objection is brought pursuant to 11 U.S.C. ' 503, Bankruptcy Rule 3007 and 3012, and Local Rule 505. This is a core proceeding.

3. This objection relates to the following claims:

a. Claim No. 9, in the amount of \$6,818.18, filed by Susan L. Larson on September 14, 2004, as an unsecured priority wage claim.

4. Claimant filed a claim as priority wage claim. Documentation attached to that claim clearly indicates that the claim is against Sederberg Corporation. Sederberg Corporation was a Minnesota corporation. Claimant does not have a basis for alleging either that Mr. Sederberg should be personally liable, or that she should receive priority status as to Mr. Sederberg.

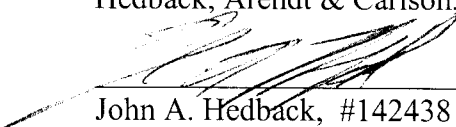
WHEREFORE, the Debtor requests an order as follows:

(A) Disallowing the above claim in its entirety; and

(B) Granting any other relief the Court deems just and proper.

Dated: 9-27-04


Hedback, Arendt & Carlson, PLLC


John A. Hedback, #142438
2855 Anthony Lane South, Suite 201
St. Anthony, MN 55418
(612) 436-3280
Attorney for Debtor

VERIFICATION

The undersigned hereby verifies that the facts contained in the Notice of Motion and Objection to Claim declare under penalty of perjury that the foregoing is true and correct according to the best of my knowledge, information and belief.

Dated: 9-19-04


Troy Sederberg

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MINNESOTA (ST. PAUL)

PROOF OF CLAIM

Name of Debtor
TROY SEDERBERGCase Number
04-34826

04 SEP 14 AM 11:57

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. §503.Name of Creditor (The person or other entity to whom the debtor owes money or property):
SUSAN L LARSON☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Name and Address where notices should be sent:

SUSAN L LARSON
122 NORELIUS STREET
ISANTI MN 55040☐ Check box if you have never received any notices from the bankruptcy court in this case.☐ Check box if the address differs from the address on the envelope sent to you by the court.

Telephone Number: 763-444-6471

Account or other number by which creditor identifies debtor:

Check here if ☐ replaces this claim ☐ amends a previously filed claim, dated: _____

1. Basis for Claim

- ☐ Goods sold
☐ Services performed
☐ Money loaned
☐ Personal injury/wrongful death
☐ Taxes
☐ Other _____

- ☐ Retiree benefits as defined in 11 U.S.C. §1114(a)
☒ Wages, salaries, and compensation (fill out below)
 Last four digits of SS #: 0220
☐ Unpaid compensation for services performed
 from _____ to _____
 (date) (date)

2. Date debt was incurred:

3. If court judgment, date obtained:

4. Total Amount of Claim at Time Case Filed: \$ _____
 (unsecured) (secured) (priority) (Total)

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 7 below.
☐ Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.

5. Secured Claim.

- ☐
- Check this box if your claim is secured by collateral (including a right of setoff).

Brief Description of Collateral:

- ☐ Real Estate ☐ Motor Vehicle
☐ Other _____

Value of Collateral: \$ _____

Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ _____

6. Unsecured Nonpriority Claim \$ _____

- ☐
- Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or if c) none or only part of your claim is entitled to priority.

7. Unsecured Priority Claim.

- ☒
- Check this box if you have an unsecured priority claim

Amount entitled to priority \$ 6818.00
Specify the priority of the claim:

- ☐ Wages, salaries, or commissions (up to \$4,925)* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3).
☐ Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).
☐ Up to \$ 2,225* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).
☐ Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7).
☐ Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).
☐ Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____).

*Amounts are subject to adjustment on 4/1/07 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

8. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

9. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

10. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

Send original to:
U.S. Bankruptcy Court
200 U.S. Courthouse
316 North Robert Street
St. Paul, MN 55101For payment send copy to:
Chapter 13 Trustee (see notice of commencement of case for name & address of chapter 13 trustee)

Date

9/14/04

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):

Susan L. Larson
Susan L. Larson

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

SHERIFF'S DEPT.

RECEIPT

DATE 7-9-04

Nº 7265

RECEIVED FROM Susan L. Larson

ADDRESS 122 Norelius St.
Isanti mn

DOLLARS \$ 43.00

FOR _____

CASH

45.00 Cash

CHECK # _____

MONEY ORDER # _____

Debra J Schuster

BY SIGNATURE

CHISAGO COUNTY SHERIFF'S DEPARTMENT

STATE OF MINNESOTA
COUNTY OF CHISAGO

AFFIDAVIT OF SERVICE

I hereby certify that on the 10 day of JULY, 2004 at 1042 hrs,
at 39400 8th Ave NORTH BEND in the County of

Chisago, State of Minnesota, I duly served the following:

- | | |
|---|--|
| <input type="checkbox"/> Order to Show Cause | <input type="checkbox"/> Summons and Complaint |
| <input type="checkbox"/> Notice of Motion, Motion and Affidavit | <input type="checkbox"/> Summons and Petition |
| <input type="checkbox"/> Affidavit | <input type="checkbox"/> Summons and Notice |
| <input type="checkbox"/> Request for Production of Statements and Documents | <input type="checkbox"/> Summons and Complaint in Unlawful Detainer |
| <input type="checkbox"/> Interrogatories | <input type="checkbox"/> Notice |
| <input type="checkbox"/> Subpoena: Witness Fees: \$ _____ | <input type="checkbox"/> Order |
| <input type="checkbox"/> Notice of Taking Deposition | <input type="checkbox"/> Garnishment Summons and Notice Disclosure Fees |
| <input type="checkbox"/> Cancellation of Contract for Deed | <input type="checkbox"/> Notice of Mortgage Foreclosure, Homestead Notice |
| <input type="checkbox"/> Order for Harassment Hearing and | <input type="checkbox"/> Order for Domestic Abuse Hearing and Ex Parte Order for |
| <input type="checkbox"/> Ex Parte for Temporary Restraining Order | Protection, Affidavit and Petition |

Other: SUMMONS AND COMPLAINT

UPON: TROY (NMN) SEDERBERG 6-9-05 (SEDERBERG CORP)

- ☒ Personally by handing to and leaving with same a true and correct copy thereof.
☐ By then and there handing to and leaving a true and correct copy thereof the house of his/her usual abode
with _____ a person of suitable age and discretion residing therein.

CERTIFICATE OF UNSERVED PROCESS:

The attached process is returned for the following reason(s):

- | | |
|--|--|
| <input type="checkbox"/> Person unknown at address | <input type="checkbox"/> Service cancelled by litigant |
| <input type="checkbox"/> No such address | <input type="checkbox"/> Unable to get response |
| <input type="checkbox"/> Person moved, new address unknown | <input type="checkbox"/> Not found |
| <input type="checkbox"/> Person moved, new address: _____ | |
| <input type="checkbox"/> Address located in _____ County | |
| <input type="checkbox"/> Other _____ | |

DATE: 7-10-04

SHERIFF OF CHISAGO COUNTY
STATE OF MINNESOTA

BY: [Signature] 1241

Deputy

JM1UPR DATE 7/13/04 STATEMENT DUE TIME 11:44:37

REMIT TO: CHISAGO COUNTY SHERIFF'S OFFICE

CIVIL DIVISION
313 MAIN ST N
ROOM 100
CENTER CITY MN 55012
651/213-7113

FILE# 1040968 DATE RECEIVED: 7/09/04 DATE RETURNED: 7/12/04
TYPE OF PROCESS: SUMMONS

SUSAN L LARSON VS SEDERBERG CORP/CREAMERY CAFE/TROY SEDERBERG

COURT : ISANTI COUNTY COURT ADMINISTRATION
555 18 AVE SW
CAMBRIDGE MN 55008

PLAINTIFF: SUSAN L LARSON
122 NORELIOUS ST
ISANTI MN 55040

DEFENDANT: SEDERBERG CORP
39400 8TH AVE
NORTH BRANCH MN 55056

MAKE CHECKS PAYABLE TO CHISAGO COUNTY SHERIFF'S OFFICE
PLEASE NOTE FILE NUMBER ON YOUR CHECK.

RETURN THIS INVOICE WITH YOUR REMITTANCE FOR PROPER CREDITING OF YOUR
ACCOUNT.

7/09/04	45.00	CASH	SUSAN L LARSON
7/12/04	30.00	SHERIFF'S FEES	AFFIDAVIT
7/12/04	15.00	MILEAGE	ENCLOSED

AMOUNT DUE

State of Minnesota

County _____

Conciliation Court

Judicial District _____

Case No. _____

STATEMENT OF CLAIM AND SUMMONS

Plaintiff #1

Name _____

Address _____

City/State/Zip _____

VS.

Defendant #1

Name _____

Address _____

City/State/Zip _____

Plaintiff #2

Name _____

Address _____

City/State/Zip _____

VS.

Defendant #2

Name _____

Address _____

City/State/Zip _____

P
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PLAINTIFF'S STATEMENT OF CLAIM

- ☐ 1. The Defendant(s) owe(s) me \$ _____, plus filing fees and costs of \$ _____, for a total of \$ _____ because (state what happened and when it happened):

- ☐ 2. The Defendant(s) has/have the following property that belongs to me (list property), _____ valued at \$ _____, plus filing fees and costs of \$ _____, for a total of \$ _____. I want the Court to order this property returned to me or make the Defendant(s) pay me money for the value of the property.

3. I believe the person(s) I am suing is/are at least 18 years old and not in the military service.

4. I understand that if I do not come to court on my hearing date, my case will be dismissed and I may have to pay money to the Defendant(s) on any counterclaim that has been filed.

NOTARY STAMP OR COURT SEAL

SWORN TO BEFORE ME ON:

Date: _____

Signature: _____

THE ABOVE STATEMENT OF CLAIM IS TRUE AND
CORRECT TO THE BEST OF MY KNOWLEDGE

Signature: _____

Name: _____

Title (if representative): _____

Telephone: _____

Notice of Settlement

The above-entitled case having been settled, the same may be and hereby is dismissed with my consent.

Date: _____

Plaintiff's Signature: _____

SUMMONS: IMPORTANT NOTICE TO THE PARTIES

You **must** come to court for a hearing on _____ at _____ m. at _____

Location/Address _____

If you do not come to court for this hearing, you may lose the case and have to pay money to the other party.

Dated: _____

Court Administrator/Deputy _____

PLAINTIFF'S COPY
"READ REVERSE SIDE FOR IMPORTANT INSTRUCTIONS"

RECEIPT

Receipt Nbr: 04-003957
Receipt Date: 06/16/2004
Case Number: * *

Court Administrator
Isanti County

04-003957

Received from: SUSAN LARSON
Paid for : CONCILIATION COURT FILING FEE
Comments : VS SEDERBERG CORP

Payer check# CASH

Amount	Description	Amount	Description	S	DLW
\$ 50.00	Conciliation Filing F	3.00	Law Library - Filing		

Total Received \$ 53.00
04-003957

Received by: DLW

Sue Larson
Isanti, MN 55040

Statement

Date
6/15/2004

To:
Sederberg Corp

				Amount Due	Amount Enc.
				\$6,765.00	
Date		Transaction		Amount	Balance
04/27/2004	Balance forward				0.00
04/29/2004	INV #1			1,860.00	1,860.00
05/07/2004	INV #2			720.00	2,580.00
05/14/2004	INV #3			725.00	3,305.00
05/21/2004	INV #4			675.00	3,980.00
05/28/2004	INV #5			740.00	4,720.00
05/30/2004	INV #6			240.00	4,960.00
06/07/2004	INV #7			930.00	5,890.00
06/14/2004	INV #8			755.00	6,645.00
06/15/2004	INV #9			120.00	6,765.00

Sue Larson

Isanti, MN 55040

Invoice

Date	Invoice #
4/29/2004	1

Bill To
Sederberg Corp

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
186	Wages	10.00	1,860.00
Total			\$1,860.00

Sue Larson

Isanti, MN 55040

Invoice

Date	Invoice #
5/7/2004	2

Bill To
Sederberg Corp

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
72	Wages	10.00	720.00
Total			\$720.00

Sue Larson

Isanti, MN 55040

Invoice

Date	Invoice #
5/14/2004	3

Bill To
Sederberg Corp

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
72.5	Wages	10.00	725.00
Total			\$725.00

Sue Larson

Isanti, MN 55040

Invoice

Date	Invoice #
5/21/2004	4

Bill To
Sederberg Corp

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
67.5	Wages	10.00	675.00
Total			\$675.00

Sue Larson

Isanti, MN 55040

Invoice

Date	Invoice #
5/28/2004	5

Bill To
Sederberg Corp

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
74	Wages	10.00	740.00
Total			\$740.00

Sue Larson

Isanti, MN 55040

Invoice

Date	Invoice #
5/30/2004	6

Bill To
Sederberg Corp

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
24	Wages	10.00	240.00
Total			\$240.00

Sue Larson

Isanti, MN 55040

Invoice

Date	Invoice #
6/7/2004	7

Bill To
Sederberg Corp

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
93	Wages	10.00	930.00
Total			\$930.00

Sue Larson

Isanti, MN 55040

Invoice

Date	Invoice #
6/14/2004	8

Bill To
Sederberg Corp

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
75.5	Wages	10.00	755.00
Total			\$755.00

Sue Larson

Isanti, MN 55040

Invoice

Date	Invoice #
6/15/2004	9

Bill To
Sederberg Corp

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
12	Wages	10.00	120.00
Total			\$120.00

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MINNESOTA

In re:

BKY 04-34826

Troy Sederberg,

MEMORANDUM

Debtor(s).

John A. Hedback, attorney for Troy Sederberg (Debtor), hereby submits its memorandum of law in support of its Objection to Claim (Motion).

Section 501 provides that a creditor in a case may file a proof of claim.

Section 502(a) provides that a claim filed in a case is allowed unless a party in interest objects.

Section 502(b) provides that if an objection is made a claim shall be allowed unless it can be shown that the claim is unenforceable against the debtor or property of the debtor.

Debtor contends that the claimant has no legal right of recovery against him.

Hedback, Arendt & Carlson, PLLC

Dated: September 27, 2004

/s/ John A. Hedback

John A. Hedback, #142438
2855 Anthony Lane South, Suite 201
St. Anthony, MN 55418
(612) 436-3280
Attorneys for Debtor

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MINNESOTA

In re:

BKY 04-34826

Troy Sederberg,

**UNSWORN DECLARATION FOR
PROOF OF SERVICE**

Debtor(s).

The undersigned, being an employee of Hedback, Arendt & Carlson, PLLC, attorneys licensed to practice law in this Court, with an office address of Suite 201 Anthony Place, 2855 Anthony Lane South, St. Anthony, MN 55113, declares that on the date below, I served the following:

1. Notice of Motion, Objection to Claim, together with a copy of the proofs of claims attached to the objection;
2. Memorandum;
3. Proposed Order; and
4. Unsworn Declaration for Proof of Service

upon each of the entities named below by mailing to each of them a copy thereof by enclosing same in an envelope with first class mail postage prepaid and depositing same in the post office at St. Anthony, Minnesota addressed to each of them as follows:

Susan L. Larson
122 Norelius Street
Isanti, MN 55040

Office of United States Trustee
1015 U.S. Courthouse
300 South Fourth Street
Minneapolis, MN 55415

Jasmine Z. Keller
Chapter 13 Trustee
12 South Sixth Street
Suite 310 Plymouth Bldg
Minneapolis, MN 55402

and I certify under penalty of perjury, that the foregoing is true and correct.

Dated: September 27, 2004

_____/e/ John A. Hedback_____

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MINNESOTA

In re:

BKY 04-34826

Troy Sederberg,

ORDER REGARDING CLAIM(S)

Debtor(s).

This case came before the Court on the Debtor's objection(s) to claim(s). Appearances were noted on the record. Based on the file, record and proceedings herein,

IT IS HEREBY ORDERED:

1. The Claim No. 9, in the amount of \$618.18, filed by Susan L. Larson on September 14, 2004, shall be disallowed in its entirety.

BY THE COURT

Dated:_____

U.S. Bankruptcy Judge